PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/535,010			ing Date 31/2005	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)									SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR	1		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b), (or (c))	N/A	N/A		N/A		N/A		1	N/A			
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A	N/A		N/A		N/A	-		N/A			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A		1	N/A			
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			x \$ =		OR	x \$ =			
INDEPENDENT CLAIMS (37 CFR 1.16(h))			mi	nus 3 =	•			`x \$ =			x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sis	heets of pape \$250 (\$125 dditional 50 s	er, the ap for smal sheets o	I drawings exceed 100 pplication size fee due II entity) for each r fraction thereof. See and 37 CFR 1.16(s).						·			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))														
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL			
										ER THAN				
AMENDMENT	01/11/2007	CLAIMS REMAINING AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR	• 21	Minus	·· 21		= 0		x \$ =	0	OR	X \$50=	0		
	Independent (37 CFR 1.16(h))	• 1	Minus	···3		= 0		x \$ =		OR	X \$200=	0		
	Application Size Fee (37 CFR 1.16(s))											7		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(J))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
, i		(Column 1)	(Colu	mn 2)	(Column 3)								
AMENDMENT	9.10.07	CLAIMS REMAININ AFTER AMENDME		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16(i))	. 21	Minus	" 0	2	= /		x \$ =	/	OR	×\$ <i>50</i> =	/		
	Independent (37 CFR 1.16(h))	• /	Minus	***	3	= /		x \$ =		OR	× \$200=			
	Application Size Fee (37 CFR 1.16(s))										360			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR				
TO AI									1	OR	TOTAL ADD'L FEE	/		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

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